PATENT APPLICATION FEE DETERMINATION RECORD												noer	
Effective October 1, 2003								10749836					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY OTHER THAN TYPE OR SMALL ENTITY					
TO	OTAL CLAIMS	<b>.</b>	18		·			RATE	FEE	7	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC F	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			/\( \) minus 20=		• –			XS 9=		OR	X\$18=		
INDEPENDENT CLAIMS			j minus 3 =		•			X43=		┨┈	X86=		
ΜL	JLTIPLE DEPE	NDENT CLAIM P	RESENT				l			OR		<del></del>	
* If the difference in column 1 is less than zero, enter "0" in column 2								+145=		OR	+290=		
CLAIMS AS AMENDED - PART II								TOTAL		OR	TOTAL	770	
	(Column 1) (Column 2) (Column 3)							SMALI	ENTITY	OR	OTHER SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	EST BER USLY :	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	<u>*</u>	Minus	<b>-</b> 2(	)	=	1	X\$ 9=		OR	X\$18=		
	Independent	<u> -  </u>	Minus	<u>                                  </u>		- '		X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						ſ	+145=	1	OR	+290=		
							L	TOTAL		OR	TOTAL		
	(Column 1) (Column 2) (Column 3)								<u> </u>	JOH ,	ADDIT. FEE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ST ER USLY	PRESENT EXTRA	ſ	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	T	X\$ 9=		OR	X\$18=		
	Independent		Minus	***		= .	ŀ	X43=	<del> </del>		X86=		
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						ŀ			OR			
							L	+145=		OR	+290=		
•							A	TOTAL DDIT. FEE		OR ,	TOTAL ODIT. FEE		
_	•	(Column 1)		(Colum		(Column 3)	_		·				
WEN		REMAINING AFTER AMENDMENT	•	NUMB PREVIOU PAID F	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		<b>3</b>		X\$ 9=	·	OR	X\$18=		
	Independent		Minus	***		=	T	X43=	•	OR	X86=		
	FIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT	CLAIM		+	+145=				-	
If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."									·	OR	+290= TOTAL		
****	the "Highest Nur	nber Previously Pai nber Previously Pai ber Previously Paid	d For IN THIS	S SPACE is	less than	1 3, enter "3."		TOTAL DIT. FEE in the ap	propriate box		DDIT. FEE		

FORM PTO-875 (Rev. 10/03)

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